



PTO/SB/22 (12-04)
Approved for use through 07/31/2006. OMB 0651-0031
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| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | | | | | Docket Number (Optional) | | | |
|---|---|--|------------------|--------------|---------------------------|------------|--|--|
| FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | | | | | 5130-00001 | | | |
| | | Number 10/764,695 | Filed 01/26/2004 | | | | | |
| For S | pine | dle Assembly | | | | | | |
| Art Unit | 36 | 571 | | | Examiner Alicia M. Torres | | | |
| | This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. | | | | | | | |
| The req | The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | | | | | | | |
| l | | | <u>Fee</u> | | Small Entity Fee | | | |
| 1 | | One month (37 CFR 1.17(a)(1)) | \$120 | | \$60 | \$ | | |
| | | Two months (37 CFR 1.17(a)(2)) | \$450 | | \$225 | \$ | | |
| | • | Three months (37 CFR 1.17(a)(3)) | \$1020 | | \$510 | \$510.00 | | |
| | | Four months (37 CFR 1.17(a)(4)) | \$1590 | | \$795 | \$ | | |
| | | Five months (37 CFR 1.17(a)(5)) | \$2160 | | \$1080 | \$ | | |
| Apr | Applicant claims small entity status. See 37 CFR 1.27. | | | | | | | |
| A C | 02/15/2005 DTESSEM1 00000081 10764695 A check in the amount of the fee is enclosed. | | | | | | | |
| Pa | , 01 FC:2253 510.00 0P Payment by credit card. Form PTO-2038 is attached. | | | | | | | |
| ☐ The | e Dii | rector has already been authorized to ch | arge fee | es in this a | pplication to a Deposi | t Account. | | |
| | The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to | | | | | | | |
| | • | t Account Number <u>01.2000</u> IG: Information on this form may become public | c. Credit | _ | enclosed a duplicate | • • | | |
| | WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | | | | | |
| I am th | I am the applicant/inventor. | | | | | | | |
| assignee of record of the entire interest. See 37 CFR 3.71. | | | | | | | | |
| Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). | | | | | | | | |
| attorney or agent of record. Registration Number 40,689 | | | | | | | | |
| attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 | | | | | | | | |
| February 9, 2005 | | | | | | | | |
| Signature | | | | | | | | |
| Joseph D. Kuborn | | | | | 414-271-7590 | | | |
| Typed or printed name | | | | | Telephoi | ne Number | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | | | | | | |
| Lin | otal | 4 | ubmitted | | | | | |

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/17 (12-04)
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| | | | Fo |)r 6 | · T | ZU | UO - | | | |

Effective on 12/08/2004.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) \$510.00

| Complete if Known | | | | | |
|----------------------|------------------|--|--|--|--|
| Application Number | 10/764,695 | | | | |
| Filing Date | 01/26/2004 | | | | |
| First Named Inventor | Mark I. Serdan | | | | |
| Examiner Name | Alicia M. Torres | | | | |
| Art Unit | 3671 | | | | |
| Attorney Docket No. | 5130-00001 | | | | |

| METHOD OF PAYMENT (check all that apply) | | | | | | | | |
|--|---------------------|--------------------------------|----------------|------------------------|---------------------|------------------|-----------------------|----------|
| | | | | | | | | |
| Check Credit Card Money Order Other (please identify): | | | | | | | | |
| Deposit Account Deposit Account Number: 01.2000 Deposit Account Name: Andrus, Sceales, Starke & Sawall, LLP | | | | | | | | |
| For the above-identi | | | | y authorized to | o: (check all th | at apply) | | |
| Charge fee(s) |) indicated b | elow | | Char | ge fee(s) indic | ated below, exce | pt for the filing fee | |
| | | e(s) or underpaym | ents of fee(s | Cred | lit any overpay | ments | | |
| under 37 CFF WARNING: Information on this | | | dit card infor | | | | vide credit card | |
| Information and authorization | | | | | | | | |
| FEE CALCULATION | | | | | | | | |
| 1. BASIC FILING, SEAF | | | | | =>< 4.5 4.5 4.5 4.4 | T: 0.11 FFF0 | | |
| | FILING | FEES Small Entity | SEARC | H FEES Small Entity | | TION FEES | | |
| Application Type | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fees Paid (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | | |
| 2. EXCESS CLAIM FEE | :S | | | | | | Small Er | |
| Fee Description Each claim over 20 or, for | or Reissues | each claim ov | er 20 and n | ore than in t | the original r | natent | Fee (\$) Fee (\$ | _ |
| Each independent claim | | • | | | | | | |
| Multiple dependent clain | - | | . • | | | <i>.</i> | 360 180 | |
| | Extra Claim | | Fee Pai | | | ependent Claims | _ | |
| 20 = HP = highest number of total of | claims paid for | x r. if greater than 20 | _= | 0.00 | <u>Fee (\$)</u> | <u>Fee Pai</u> | <u>id (\$)</u> | |
| Indep. Claims | Extra Claim | | Fee Pai | | | _ | | |
| HP = highest number of inden | 0 nendent claims | X s paid for if greater the | | 0.00 | | | | |
| HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE | | | | | | | | |
| If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) | | | | | | | | |
| for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | | |
| Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) | | | | | | | | |
| 100 = / 50 = (round up to a whole number) x =\$0.00 | | | | | | | | |
| 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification \$120 for (no small entity discount) | | | | | | | | |
| Non-English Specification, \$130 fee (no small entity discount) Other: Small Entity Extension of Time \$510.00 | | | | | | | | |
| Other: Small Entity Extension of Time | | | | | | | | <u>U</u> |

| SUBMITTED BY | | | | | | | |
|-------------------|------------------|--|------------------------|--|--|--|--|
| Signature | Joseph D. Kuborn | Registration No. (Attorney/Agent) 40,689 | Telephone 414-271-7590 | | | | |
| Name (Print/Type) | Joseph La | | Date 02/09/2005 | | | | |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidertigity is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.